

**TOWN OF CANADICE
STOVES/FIREPLACE/FURNANCE**

Permit # _____

____ New Installation ____ Replace ____ Damage/Repair ____ Day Care Inspection

Please complete all information:

Date: _____

Owners Name: _____	*General Contractor: _____
Address: _____	Address: _____
City: _____ State _____ Zip _____	City: _____ State _____ ZIP _____
Phone: () _____	Phone : () _____
Tax Map # _____	*Certificate of Workers comp or affidavit

House: _____ (Single family, Apartment, Manufacture Home)

Manufacture: _____

Style: _____ (pellet, wood/coal, gas: LP or Natural) circle one

(If gas burning: ____ Standing Pilot Light or ____ Electronic Ignition)

Model Number: _____ Serial Number: _____

Chimney _____	or	Vent _____
____ Existing		____ New installation
____ Prefabricated		____ Masonry
Support: ____ Wall	____ Ceiling	____ Roof
Stove Pipe Size: ____	Liner Size: ____	Liner: Masonry relined ____ Masonry Clay ____

PROJECT COST: _____

Permit Cost: \$40.00

Check list

Homeowner/General Contractor Signature

Submit: Information for permit application

1. ____ Spec for heating unit and chimney, (Provided by Manufacture)
2. ____ Floor plan to scale, (show installation, nearest windows, nearest interior & exterior doorways)
3. ____ Elevation, (show chimney or vent installation)
4. ____ Combustion air calculations for unvented units (see manufacture info)
5. ____ Setback location for masonry chimney from property lines(_____)

____ **APPROVED**
____ **DISAPPROVED**

Date

Code Enforcement Officer

Date

Town Clerk